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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

To: Commissioner for Patents

Application Number	10/608,824
Filing Date	06-26-2003
First Named Inventor	Eran Steinberg
Art Unit	2624
Examiner Name	SETH, MANAV
Attorney Docket Number	FN102-T

	Box 1450 andria, VA 22	313-1450							
Please withdraw me as attorney or agent for the above identified patent application, and									
all the attorneys/agents of record.									
the attorneys/agents (with registration numbers) listed on the attached paper(s), or									
				30349					
x   the attorneys/agents associated with Customer Number   NOTE: This box can only be checked when the power of attorney of							اـ hlicati	on is to all the	
practitioners associated with a customer number.									
The reasons for this request are:									
Per client instructions.									
CORRESPONDENCE ADDRESS									
The correspondence address is NOT affected by this withdrawal.									
Change the correspondence address and direct all future correspondence to:									
2. — 01	lange the con-	Japonuence address and direct		ture correspond	CITCO II	,		_	
The address associated with Customer Number: 72				721	104				
OR .									
	m or lividual Name								
Address									
City State			State				Zip		
Country									
elephone								nation.com and	
Signature	/Soona-	Kun Oh/				jenr	ifer@!	Fotonation.com	
Name		Kun Oh			Regis	stration No.	48	,210	
Date		er 17, 2007			Telephone No. 510-652-6418				
OTE: Withdr	awal is effective wh	nen approved rather than when received	f. Unles	s there are at least	30 days	between appro	val of v	withdrawal and the expiration	

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA. 2331-3450, DO. NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.